

Gary Robertson
p. & interesting

105 CLEPINGTON ROAD,
DUNDEE,
SCOTLAND.

13th APRIL 1970

DEAR HAROLD,

THANK YOU FOR YOUR LETTER OF 26th FEBRUARY. GARY RECENTLY WROTE TO ME REGARDING A LETTER I WROTE TO HIM CONTAINING MANY POINTS NOT INCLUDED IN THE MATERIAL I HAVE ALREADY SENT YOU; I DON'T KNOW IF YOU KNOW OF THIS - WHETHER OR NOT HE INFORMED YOU OF THE LETTER'S CONTENTS. GARY DISAGREED WITH ALMOST ALL OF THE POINTS I NOTED SO HE MAY NOT HAVE INFORMED YOU SINCE HE WOULD REGARD IT AS AN UNESSENTIAL BURDEN ON YOUR TIME.

I DON'T KNOW IF YOU'VE RECEIVED THE MATERIAL I SENT YOU - GARY DOES NOT AGREE WITH MY ANALYSIS OF GOVERNOR CONNALLY'S ~~W~~ MOVEMENTS RELATING TO THE f.224 HIT. IN "ANALYSIS ZAPRUDER FRAMES 222 TO 244" I GIVE A POSSIBLE EXPLANATION FOR THE MOVEMENT OF THE GOVERNOR'S RIGHT HAND AND ARM FROM f.224 THROUGH f.228. — I NOW BELIEVE THIS EXPLANATION TO BE INCORRECT; A MORE ~~PLAUSIBLE~~ PLAUSIBLE EXPLANATION FOR THE MOVEMENT OF THE GOVERNOR'S HAND FROM ITS POSITION IN HIS LAP IN f.223-4 TO ITS POSITION OF NEAR TO HIS SHOULDER AND CHIN IN f.228-91s THROUGH NERVE STIMULATION BY THE BULLET PASSING THROUGH THE WRIST. THE BULLET RIPPED THE RADIAL NERVE AND PASSED CLOSE BY THE MEDIAN NERVE: — THE MEDIAN NERVE SUPPLIES MOST OF THE FLEXOR MUSCLES OF THE FOREARM, THE THREE THENAR MUSCLES AND TWO LUMBRICALS IN THE HAND; STIMULATION OF THIS NERVE (BY THE BULLET) WOULD PRODUCE FLEXION OF THE FOREARM (E.G. HAND COMES TOWARDS THE SHOULDER) AND FLEXION AND OPPOSITION OF THE THUMB AND FIRST TWO FINGERS (E.G. A "GRIPPING" ACTION BETWEEN THUMB AND FIRST TWO FINGERS) — THIS WOULD ACCOUNT FOR THE MOVEMENT OF THE GOVERNOR'S ~~ARM~~ ARM AND THE FACT THAT HE HELD ONTO HIS HAT AFTER THE HIT.

THE RADIAL NERVE IS A SENSORY NERVE ~~OF~~ OF THE EXTENSOR COMPARTMENT

OF THE ARM AND FOREARM, SUPPLYING THE SKIN OVER THEM AND ON THE DORSUM OF THE HAND. STIMULATION OF THE RADIAL NERVE WOULD RESULT IN A SENSATION OF PAIN ~~OVER~~ OVER THE EXTENSOR COMPARTMENT OF THE FOREARM AND DORSUM OF THE HAND — THIS WOULD ALMOST CERTAINLY LEAD TO ~~THE~~ A REFLEX ACTION RESULTING IN FLEXION OF THE FOREARM (E.G. SIMILAR TO THE "HOT STOVE" REFLEX — THE HAND IS WITHDRAWN FROM THE POSITION OF THE STIMULUS; IN THIS CASE THE POSITION OF THE STIMULUS WOULD APPEAR TO BE ~~OVER~~ ^{OVER} THE BACK OF THE HAND AND EXTENSOR COMPARTMENTS, SO FLEXION OCCURS TO WITHDRAW THE ARM).

THE MOVEMENT OF GOVERNOR'S ARM AND HAND THROUGH f.224-8 IS ALMOST CERTAINLY DUE TO A COMBINATION OF THE STIMULATION OF THE RADIAL AND MEDIAN NERVES. THE TIME LAPSE FROM STIMULATION (E.G. IMPACT) ~~AT~~ TO THE START OF CONTRACTION APPEARS TO BE IN THE REGION OF 100 MILLISECS. FROM THE ZAPRUDER FILM, THUS IT WOULD APPEAR THAT THE MEDIAN NERVE STIMULATION, BEING DIRECT STIMULATION AND NOT INVOLVING A REFLEX PATHWAY, ~~STARTED~~ STARTED THE CONTRACTION; THE RADIAL NERVE STIMULATION INSIGATING A REFLEX ARC, WHICH WOULD TAKE A LITTLE LONGER, WHICH SUPPLEMENTED THE EXISTING CONTRACTION OF THE FLEXOR MUSCLES.

I DON'T KNOW IF YOU AGREE WITH THIS, BUT IT ACCOUNTS FOR THE NATURE AND SPEED OF THE GOVERNOR'S ARM AND HAND MOVEMENT THROUGH f.224-8. I MAY HAVE THIS EXPLANATION TYPED AND ADD IT TO THE "ANALYSIS".

GARY INFORMS ME YOU HAVE AN EXPLANATION FOR THE CAUSE OF THE TEARS IN JFK'S SHIRT AND THE NICK IN THE TIE — I WOULD LIKE TO HEAR THIS

- THERE IS ONLY ONE EXPLANATION THAT I COULD THINK WAS EVEN VAGUELY POSSIBLE, APART FROM THE ROSE STEM THEORY, BUT I FEEL THIS IS UNLIKELY. IT IS THAT A NURSE POSSIBLY STARTED TO CUT INTO THE SHIRT WITH SCISSORS BUT STOPPED AFTER PUNCTURING THE CLOTH, POSSIBLY SEEING THE THROAT WOUND. THIS IS UNLIKELY ON SEVERAL COUNTS, ~~BUT~~ I THINK THE MOST IMPORTANT REASON BEING THAT WHATEVER CAUSED THE ~~THROAT~~ ANTERIOR NECK WOUND ~~CAUSED~~ HAD TO PASS THROUGH THE SHIRT. I CANNOT ~~BE~~ ACCEPT THAT THE POSITION OF THE WOUND WAS EXPOSED (TO A FRONT SHOT) ABOVE THE COLLAR — YOU JUST CANNOT EXPOSE THE LEVEL OF THE 2ND AND 3RD TRACHEAL RINGS ABOVE THE COLLAR WHEN WEARING A WELL-FITTING SHIRT, WHICH THE PHOTOS SHOW JFK ~~WAS~~ WAS WEARING. AND THE POSITION OF CLOTHING TEARS CORRESPONDS EXACTLY TO THE POSITION OF THE NECK WOUND — IT WOULD TAKE AN INCREDIBLE COINCIDENCE FOR THIS TO HAVE OCCURED VIA SEPERATE INSTRUMENTS OR PROJECTILES.

I FEEL THAT THE ROSE STEM THEORY EXPLAINS ALL THE FACTS, EVEN THOUGH IT SOUNDS A LUDICROUS THEORY, AND I HAVE NOT HEARD OF, NOR CAN I THINK OF, ANOTHER PLAUSIBLE THEORY.

I LOOK FORWARD VERY MUCH TO READING YOUR BOOKS ON THE MEDICAL EVIDENCE; THIS ASPECT INTERESTS ME VERY MUCH. GARY AND YOURSELF KEEP EMPHASISING THAT I SHOULD NOT TAKE THE MEDICAL EVIDENCE FROM OFFICIAL SOURCES AT FACE VALUE — BUT FROM ALL THE INFORMATION I HAVE I BELIEVE THAT ONLY REAL MISTAKES MADE BY THE DOCTORS WAS THAT: 1) THEY ASSUMED THE ~~THE~~ ANTERIOR NECK ~~DAMAGE~~ DAMAGE WAS DUE TO THE TRACHECTOMY SO DID NOT DISSECT THE REGION. 2) THEY FAILED TO DISSECT OUT THE SHOULDER WOUND.

THERE WAS, OF COURSE, THE OBVIOUS "MISTAKE" (TO PUT IT MILDLY) OF NOT EXAMINING ALL THE X-RAYS AT THE TIME. WHAT AMAZES ME IS THE FACT THAT THE DOCTORS NOTED A TRACHEOTOMY HAD BEEN PERFORMED ~~YET~~ YET WHEN THEY EXAMINED THE BODY THE REASON FOR THE TRACHEOTOMY (THE ANTERIOR NECK WOUND) HAD BEEN VIRTUALLY OBLITERATED; YET APPARENTLY DIDN'T TRY TO DISCOVER WHY THE TRACHEOTOMY HAD BEEN PERFORMED. THIS IS INCREDIBLE, A TRACHEOTOMY IS ONLY PERFORMED WHEN ABSOLUTELY NECESSARY; WHAT THE AUTOPSY DOCTORS THOUGHT (OR DIDN'T THINK) I CAN'T IMAGINE. TO PHONE UP AND ASK PERRY, AFTER THE BODY HAD GONE, WHY HE'D PERFORMED THE TRACHEOTOMY SHOWS THAT THE MAN ~~WAS~~ WAS NOT PERFORMING HIS JOB WELL ENOUGH (AGAIN, PUTTING IT MILDLY) — THE BODY SHOULD NOT HAVE BEEN REMOVED TILL THE REASON FOR THE TRACHEOTOMY HAD BEEN DISCOVERED, EVEN IF IT INVOLVED PHONING PERRY, BUT THIS SHOULD HAVE BEEN DONE PRIOR TO REMOVAL OF THE BODY.

ALL THE REST OF THE "DISCREPANCIES" CONCERNING THE MEDICAL EVIDENCE STEMMED FROM THESE ORIGINAL MISTAKES AT THE TIME OF THE AUTOPSY. SOME OF THE "DISCREPANCIES" WHICH GARY POINTS OUT ARE TO MY MIND NOT DISCREPANCIES AT ALL AND ARE EXPLICABLE FAIRLY EASILY. FOR EXAMPLE, GARY SAYS THAT THE 1968 JUSTICE DEPT. PANEL REVIEW OF THE X-RAYS AND PHOTOS SAYS THERE IS METAL IN THE NECK — THIS IS NOT CORRECT; THE ~~X-RAY~~ X-RAY FILMS 8, 9, and 10 WERE ALL ANTERO-POSTERIOR PROJECTIONS ^{BEEN} THUS THERE IS NO MEASURE OF DEPTH — THE METAL COULD HAVE ^{BEEN} ANYWHERE FROM BACK TO FRONT, ONE CANNOT SAY CATEGORICALLY THAT IT WAS IN THE NECK.

As For The Shoulder Wound¹, The Discrepancy Of 1cm Between Autopsy Report And 1968 Panel Report Is Explicable By The Size Of The Wound And Its Surrounding Abrasions - The Point From Which The Doctors Took Their Measurements Could Vary By 1cm Or So According To Which Point On The Wound They Took To Start Their Measurement.

With Regard To The Position Of The Entry Wound In The Skull; The Apparent Discrepancy Between The Autopsy Surgeons' "Slightly Above The External Occipital Protruberence" And The Panel Review Surgeons' "100mm Above The Ext. Occ. Prot." Is Explicable Via Two Factors - 1) Again, The Point From Which The Doctors Started Their Measurements - The Ext. Occ. Prot. Is Not A Precise Point; It Is A Sort Of Half Moon Shaped "Bump" Of Up To Several Cms. "Radius" Of Curvature. 2) X-Rays Are Not A Direct Shadow, They Are Cast By A Cone Of X-Rays, ~~not~~ Only The Central Ray Casting A Direct, Undistorted, Shadow; All The Other Rays Cast A Distorted Image, The Further From The Central Ray The More The Distortion. This, Combined With The Alignment Of The A-P Plane Of The Skull To The Central Ray (And The 1968 Panel Report Noted That The Two Lateral Skull X-Rays - 2 and 3 - Were Taken From Different Projections; That Is, The A-P Plane Of The Skull Was At Different ~~the~~ Alignments To The Central Ray For The Two Films), Leads To Distortion And Thus Measurements Are Not The Same By X-Ray Film As They Are In Actuality.

- 6 -

WITH REGARD TO THE SHOULDER WOUND — I BELIEVE THE DUANE ROBINSON PHOTOS IN THE P.M. ISSUE I SENT YOU SHOW THE "BUNCHING" OF JFK'S COAT BEST, BUT I BELIEVE THE PHOTOS TAKEN IN DEALEY PLAZA PRIOR TO THE SHOTS ALSO SHOW THE "BUNCHING." I BELIEVE THIS ACCOUNTS FOR THE APPARENT DISCREPANCY BETWEEN THE HOLES IN COAT AND SHIRT POSITIONS AND THE POSITION OF THE WOUND IN JFK'S SHOULDER. IF THE WOUND IN THE SHOULDER HAD BEEN LOWER IT WOULD HAVE ^{ALMOST CERTAINLY} HIT BONE — TO MY KNOWLEDGE THERE IS NO EVIDENCE OF BONE DAMAGE (GARY MENTIONED THE ALLEGED STATEMENT OF NURSE HENCHLIFE BUT DIDN'T SAY WHAT IT CONTAINED; AND I KNOW OF NO OTHER EVIDENCE). IF IT MISSED BONE IT WOULD HAVE PROBABLY ENTERED THE LUNGS; AGAIN, THERE IS NO REAL EVIDENCE OF LUNG DAMAGE (OTHER THAN TO THE APEX).
WHAT DO YOU BELIEVE HAPPENED TO THE SHOT IN THE SHOULDER (OR BACK AS YOU THINK)?

WITH REGARD TO THE FATAL SHOT — SURELY IF A DUM-DUM ENTERED FROM THE RIGHT FRONT AND HAD ENOUGH ENERGY TO COUNTERACT THE REAR SHOT AND SEND THE HEAD AND BODY BACK IT WOULD HAVE DISPERSED METAL EITHER IN THE LEFT CEREBRAL HEMISPHERE OR BELOW THE LEVEL OF FLOOR OF THE ANTERIOR FOSSA, WOULD IT NOT? THE PANEL REPORT ~~IS~~ NOTED NO METAL IN THESE AREAS. IF YOU ARE NOT WILLING TO ACCEPT THEM ON THIS POINT THEN WHY ACCEPT ANY OF THE OTHERS?

IN MY OPINION THE NEAR-TANGENTIAL NATURE OF THE HEAD SHOT COMBINED WITH THE ALMOST IMMEDIATE NEURO-MUSCULAR REACTION ACCOUNT FOR ALL THE FACTS. I THINK THE MAJOR PORTION OF THE FATAL SHOT BULLET EXITED THE CAR TO HIT THE INLET AND TURF ON S. ELM AND WAS DEFLECTED

-7-

VIA THE SLOPE AT THIS POINT, OFF TO THE RIGHT AND CAUSED THE TAQUE CURB HIT. I THINK THE TWO LARGE FRAGMENTS FOUND IN THE CAR PROBABLY CAME FROM THE SHOT THROUGH CONNALLY, WHICH ALMOST CERTAINLY BROKE UP GOING THROUGH THE WRIST, ONE FRAGMENT CAUSING THE THIGH WOUND.

WELL, I HAD BETTER NOT TAKE UP ANY MORE OF YOUR TIME, I APOLOGIZE IF I'VE TAKEN UP TOO MUCH. HOPE YOU CAN READ THIS PRINTING ALRIGHT. IS THERE ANY PROSPECT OF YOUR BOOKS ON THE MEDICAL EVIDENCE BEING AVAILABLE IN THE NEAR FUTURE?

I LOOK FORWARD TO HEARING FROM YOU, ESPECIALLY WITH REGARD TO THE "ANALYSIS" AND THE f.224 HIT TO CONNALLY.

BEST WISHES,

